

UNIFORM HANDLING EXEMPTION REQUEST

Valley Residential Properties July 1, 2007 - June 30, 2008



REQUIRED INFORMATION -- All applicants

Date:		Assessor's	Assessor's Parcel Number (APN):				
A.	A. Address of property for which the exemption is requested:						
	First Name	Last Name	Street Address	City	Zip Code		
В.	Name, mailing address and telephone number of person requesting exemption:						
	Street Address	City	Zip Code	T	Telephone #		
C.	Property Owner's Name and Mailing Address if different from above:						
	Name	Address		City	Zip Code		
D.	I presently	Own Rent the pro	emises identified in "A" abov	ve.			
Pl	ease fill out either	r Section 1or 2.					
Co Ar	ounty Transfer Station nual renewal requi tion/landfill receipts	<u>n/Landfill:</u> res three (3) sets of for a total of twelve (12)	ose Of My Trash At Least our (4) consecutive week original receipts in all, to	dy San Bernard be eligible for an	ino County transfer		
	·	eekend or Part-time Resid you presently dispose of to	lent ash in the space provided:				
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Required Documents:

The following documents are the only acceptable documents.

Any missing documents will be cause for denial.

Fulltime Residents

- * \$15 non-refundable application fee (see below)
- *\$85.14 for pre-paid disposal card (see next page)

Landfill receipts (for a total of 12 original receipts)

Weekend or Part-time Resident

- * \$15 non-refundable application fee (see below)
- * Most recent trash bill from primary residence
- * Most recent electric bill from primary residence
- * Most recent electric bill from secondary residence

<u>All Applicants</u>: Beginning February 1, 2005, a non-refundable application fee of \$15 in the form of a check or money order (no cash) payable to San Bernardino County must be included with this Application.

Note: The exemption is only effective through June of 2008 and it is the responsibility of the property owner to reapply.

In addition to the fee and documentation required above, for exemptions to be issued to residents residing in the Valley Region (unincorporated areas of Upland, Chino, Fontana, San Bernardino, Muscoy, Mentone, Colton, Rialto, etc.), residents are required to pre-pay the disposal fee of \$85.14 in order to receive a pre-paid disposal card that will allow the resident to dispose of household trash at a County owned landfill or transfer station. For information on the landfill/transfer station nearest to your residence, call 800-722-8004. (For residents of the Mountain Region, the disposal fee is collected on the annual property tax bill, and therefore these residents are not required to pre-pay the disposal fee.)

I understand that San Bernardino County Code Section 33.0805. Refuse Removal requires that all waste, which contains Garbage produced or accumulated in or about a residence, shall be removed from the premises at least once every seven (7) days to an approved Solid Waste Facility. In addition, I understand that all exemptions are conditional and that County Code Enforcement Officers may inspect my property to ensure proper visual and sanitary storage of trash or, if applicable, to ensure that my property is vacant. I also understand that valid complaints from my neighbors regarding the storage of trash on my property or that my property is not vacant will result in the immediate loss of my exemption status. I certify under penalty of perjury that all waste from the premises will be properly handled and disposed of as described in sections 1 and 2 and as required above. I understand that as a condition of the continuation of this exemption, I or my representative must re-apply prior to July 1, 2008. I understand that, should it be approved, the County, for good cause, may revoke the exemption.

Signature	Date

NOTE: YOU MUST SIGN ABOVE IN ORDER TO RECEIVE AN EXEMPTION!

WHEN COMPLETED, MAIL TO:

County of San Bernardino
SOLID WASTE MANAGEMENT DIVISION
222 West Hospitality Lane, 2nd Floor
San Bernardino, CA 92415-0017
ATTENTION: UNIFORM HANDLING EXEMPTIONS

OFFICE USE ONLY:	
EXEMPTION STATUS/DATE IF NO, PLEASE EXPLAIN	☐ APPROVED ☐ NOT APPROVED
EXEMPTION QUALIFICATION IF OTHER, PLEASE EXPLAIN	□ VACANT PROPERTY □ RECEIPT PROGRAM □ OTHER